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Bib Data Sheet

CONFIRMATION NO. 4733

<b>SERIAL NUMBER</b> 09/893,746	<b>FILING OR 371(c) DATE</b> 06/29/2001 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> 7767-173562
<b>APPLICANTS</b> Ronald J. Pettis, Cary, NC; Noel G. Harvey, Efland, NC; Paul G. Alchas, Wayne, NJ; James Down, Cary, NC;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/606,909 06/29/2000 which is a CIP of 09/835,243 04/13/2001 PAT 6,569,143 which is a CIP of 09/417,671 10/14/1999 PAT 6,494,865				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 07/16/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> NC	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 63
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> BECTON, DICKINSON & COMPANY 1 BECTON DRIVE MC 089 FRANKLIN LAKES ,NJ 07417-1880				
<b>TITLE</b> Method for altering drug pharmacokinetics based on medical delivery platform				
<b>FILING FEE RECEIVED</b> 1812	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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*someone else has parent*

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Verified and Acknowledged  
 Examiner's Signature \_\_\_\_\_ Initials \_\_\_\_\_

**ADDRESS**  
 26694

**TITLE**  
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